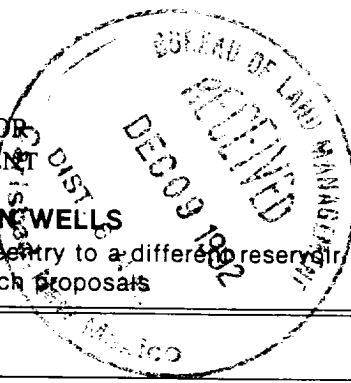


UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT



FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.

**SUBMIT IN TRIPLICATE**

1. Type of Well  
 Oil Well     Gas Well     Other

2. Name of Operator  
 Santa Fe Energy Operating Partners, L.P.

3. Address and Telephone No.  
 550 W. Texas, Suite 1330, Midland, TX 79701 (915) 687-3551

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
 (C), 490' FNL and 2131' FWL, Sec. 9, T-18S, R-33E

5. Lease Designation and Serial No.  
 NM-55149

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
 Kachina 9 Federal #1

9. API Well No.  
 30-025-31787

10. Field and Pool, or Exploratory Area  
 South Corbin (Wolfcamp)

11. County or Parish, State  
 Lea Co., NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Ran csg string</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

- 12-2-92: Depth 4350'. RU and ran 107 jts 8-5/8" 32# K-55 SY&C casing and set at 4349'. Cemented w/ 1500 sx Cl C Lite + 9# salt followed by 200 sx Cl C + 2% CaCl<sub>2</sub>. Plug down at 12:00 a.m. 12/3/92. Circ. 30 sx to pit.
- 12-3-92: WOC. Cut off and weld on 8-5/8" x 3M x 5-1/2" WH. NU and test BOP's. Tested choke manifold to 3000 psi and hydril to 1500 psi - okay. PU BHA and TIH.
- 12-4-92: TIH. Test casing to 1200 psi. WOC total of 24½ hours. Resume drilling operations.

14. I hereby certify that the foregoing is true and correct.

Signed [Signature] Title Sr. Production Clerk Date Dec. 7, 1992

(This space for Federal or State office use)

Approved by [Signature] Title \_\_\_\_\_ Date \_\_\_\_\_  
 Conditions of approval, if any: